




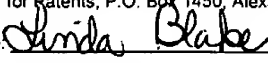
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PTO/SB/31 (06-03)
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|---|--|---|--|--------------------------|
| NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES | | Docket Number (Optional) JJJ-P01-558 | | |
| In re Application of Charette et al. | | TECH CENTER 1600/2000 | | |
| Application Number 09/508254 | | | | Filed October 2, 2000 |
| For SYNERGISTIC EFFECTS OF OP/BMP MORPHOGENS AND GDNF/NGF NEUROTROPHIC FACTORS | | | | |
| Art Unit 1647 | | | | Examiner R. Deberry |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. | | | | |
| The fee for this Notice of Appeal is (37 CFR 1.17(b)) | | \$ 330.00 | | |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: | | \$ 165.00 | | |
| <input type="checkbox"/> A check in the amount of the fee is enclosed. | | | | |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. | | | | |
| <input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. | | | | |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 18-1945. I have enclosed a duplicate copy of this sheet. | | | | |
| <input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. | | | | |
| I am the | | | | |
| <input type="checkbox"/> applicant /inventor | |  Signature | | |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | Gloria Fuentes Typed or printed name | | |
| <input checked="" type="checkbox"/> attorney or agent of record. | | | | |
| Registration number 47,580 | | (212) 497-3624 Telephone number | | |
| <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). | | January 12, 2004 Date | | |
| Registration number if acting under 37 CFR 1.34(a) | | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below". | | | | |
| <input type="checkbox"/> *Total of 1 forms are submitted. | | | | |

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: January 12, 2004 Signature:  (Linda Blake)

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